

1CG93 U.S. PTO
03/16/01

BERESKIN & PARR

BOX 401, 40 KING STREET WEST, TORONTO, CANADA M5H 3Y2
PHONE (416) 364-7311 • FAX (416) 361-1398 • WWW.BERESKINPARR.COM

PTO/SB/05 (11-00)

Please type a plus sign (+) inside this box \rightarrow

Approved for use through 10/31/2002 OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	11766-1
First Inventor	ZAROVINSKY, Adolph
Title	SYSTEM AND METHOD FOR PROCESSING...
Express Mail Label No.	1059

0978093108
03/16/01

APPLICATION ELEMENTS

See MPEP chapter 800 concerning utility patent application contents.

- Fee Transmittal Form** (e.g., PTO/SB/17)
(Submit as original and duplicate for fee processing)
- Applicant claims small entity status.**
See 37 CFR 1.27.
- Specification** [Total Pages]
(Preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s)** (35 U.S.C. 113) [Total Sheets]
- Oath or Declaration** [Total Pages]
 - Newly executed (original or copy)
 - Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet.** See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

- CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission** (if applicable, all necessary)
 - Computer Readable Form (CRF)
 - Specification Sequence Listing on:
 - CD-ROM or CD-R (2 copies); or
 - paper
 - Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

- Assignment Papers (cover sheet & document(s))
- 37 CFR 3.73(b) Statement Power of Attorney
(When there is an assignee)
- English Translation Document (if applicable)
- Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
- Preliminary Amendment
- Return Receipt Postcard (MPEP 503)**
(Should be specifically itemized)
- Certified Copy of Priority Document(s)
(if foreign priority is claimed)
- Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/05 or its equivalent
- Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76

Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application information: *Examiner* _____ *Group Art Unit* _____

FOR CONTINUATION OR DIVISIONAL APPS ONLY: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label Correspondence address below

1059
(Insert Applicant's P.O. or Mailing Slip Code (not name))

Name	Bereskin & Parr				
	Box 401				
Address	40 King Street West				
City	Toronto	State	Ontario	Zip Code	M5H 3Y2
Country	Canada	Telephone	(416) 364-7311	Fax	(416) 361-1398

Name (Print/Type)	H. Samuel Fries	Registration No. (Attorney/Agent)	34-696 26 426
Signature	<i>H. Roger Hark</i>	Date	March 15, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete any form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

BERESKIN & PARR

BOX 401, 40 KING STREET WEST, TORONTO, ONTARIO CANADA M5H 3J2
PHONE (416) 364-7311-FAAX (416) 361-1398-WWW.BERESKINPARR.COM

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) **445.00**

Complete if Known

Application Number	not yet assigned
Filing Date	filed concurrently herewith
First Named Inventor	ZAROVINSKY, Adolph
Examiner Name	n/a
Group Art Unit	n/a
Attorney Docket No.	11766-1

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 022095

Deposit Account Name: Bereskin & Parr

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed: # 3694

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Fee Code	Large Entity	Small Entity	Fee Description	Fee Paid
105	130	65	Surcharge - late filing fee or oath	
127	80	27	25	Surcharge - late provisional filing fee or cover sheet
139	130	139	130	Non-English specification
142	2,520	147	2,520	Fee for filing a request for <i>ex parte</i> reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	390	216	195	Extension for reply within second month
117	890	217	445	Extension for reply within third month
118	1,390	218	695	Extension for reply within fourth month
128	1,890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,240	241	620	Petition to revive - unintentional
142	1,240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	130	123	130	Petitions related to provisional applications
126	180	126	180	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application
Other fee (specify) _____				
*Reduced by Basic Filing Fee Paid			SUBTOTAL (3)	(\$) 0.00

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	110	201	355	Utility filing fee	355.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	
SUBTOTAL (1)					(\$) 355.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
30	-20** = 10	X 9.00	90.00
Independent Claims	-3** =	X	0
Multiple Dependent			

Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
103	18	203	9	Claims in excess of 20	
102	80	202	40	Independent claims in excess of 3	
104	270	204	135	Multiple dependent claim, if not paid	
109	80	209	40	** Reissue independent claims over original patent	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$) 90.00

*For number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	<u>H. Samuel F. H. ROBE R. HARR</u>	Registration No.	<u>31-656 2046</u>	Telephone	<u>(416) 364-7311</u>
Signature	<u>[Signature]</u>	Date	<u>March 15, 2001</u>		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.